

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 8, 2004

10/679,224

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS | | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | minus 20 = | |
| INDEPENDENT CLAIMS | minus 3 = | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

Amend 10/5/05 CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|--|---|------------|---|
| AMENDMENT | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | 64 | Minus | ** 43 = |
| Independent | 4 | Minus | *** 5 = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> |

| SMALL ENTITY TYPE | OTHER THAN OR SMALL ENTITY |
|----------------------|-------------------------------|
| RATE | FEES |
| BASIC FEE | 150.00 |
| OR | BASIC FEE |
| X\$ 25= | 300.00 |
| OR | X\$50= |
| X100= | X200= |
| +180= | +360= |
| TOTAL | OR TOTAL |

| SMALL ENTITY | OTHER THAN OR SMALL ENTITY |
|---------------------|-------------------------------|
| RATE | ADDITIONAL FEE |
| X\$ 25= | |
| OR | X\$50= |
| X100= | X200= |
| +180= | +360= |
| TOTAL ADDIT. FEE | OR TOTAL ADDIT. FEE |

| | (Column 1) | (Column 2) | (Column 3) |
|--|---|------------|---|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | 34 | Minus | ** 43 = |
| Independent | 4 | Minus | *** 5 = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> |

| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|---------------------|-------------------|------------------------|-------------------|
| X\$ 25= | | | X\$50= |
| OR | | | X200= |
| X100= | | | +360= |
| +180= | | | |
| TOTAL ADDIT. FEE | | OR TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|--|---|------------|---|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | | Minus | ** = |
| Independent | | Minus | *** = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> |

| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|---------|-------------------|------|-------------------|
| X\$ 25= | | | X\$50= |
| OR | | | X200= |
| X100= | | | +360= |
| +180= | | | |